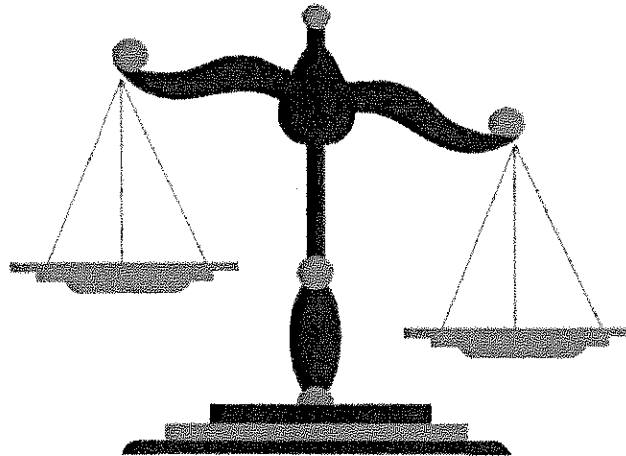


# **CITY OF DURHAM SMALL DISADVANTAGED BUSINESS ENTERPRISE PROGRAM**

## **PROFESSIONAL SERVICES FORMS**

**Revised 06/08**



**Mailing Address:**

**101 City Hall Plaza  
Durham, North Carolina 27701  
Phone: 919-560-4180  
Facsimile: 919-560-4513**

**Street Address:**

**302 East Pettigrew Street, C-180  
Durham, North Carolina 27701**

*The Department of Equal Opportunity/Equity Assurance  
Good Things Are Happening In Durham*

**Equal Business Opportunity Ordinance  
SDBE Participation Documentation**

If applicable information is not submitted with your proposal, your proposal will be deemed non-responsive.

**Declaration of Performance** must be completed and submitted with your proposal.

**SDBE Participation Documentation** must be used to document participation of Small Disadvantaged Business Enterprise (SDBE) on Professional Services projects. All SDBEs must be certified by the City of Durham's Equal Opportunity/Equity Assurance Department prior to submission date. If a business listed has not been certified, the amount of participation will be reduced from the total utilization.

**Managerial Profile** must be used to list the managerial persons in your workforce who will be participating in this project.

**Equal Employment Opportunity Statement** for your company must be completed and submitted with your proposal.

**Employee Breakdown** must be completed and submitted for the location providing the service/commodity. If the parent company will be involved in providing the service/commodity on the City contract, a consolidated employment breakdown must be submitted.

**Letter of Intent to Perform as a Sub-consultant/Subcontractor** must be completed for SDBEs proposed to perform on a contract. This form must be submitted with the proposal.

### Managerial Profile

Name of Firm: Reliance Standard  
 Contact Person: Alex Johnson  
 Title: Regional Step Loss Manager  
 Address: 601 Carnegie Blvd, #300, Charlotte, NC 28209  
 Telephone No.: 704-494-2920  
 Date: 4-10-2013

List the managerial persons in your work force who will be participating in this project, including name, position, and whether the individuals are minority or woman within the definition\* of the City of Durham's Equal Business Opportunity Ordinance.

### Managerial Employees

NAME	POSITION	SOCIALLY/ECONOMICALLY DISADVANTAGED* (YES/NO)
<u>Kathy Casott</u>	<u>VP Underwriting</u>	<u>YES</u>
<u>Deb Angelini</u>	<u>VP Claims</u>	<u>YES</u>
<u>Lynn Armon</u>	<u>VP Underwriting</u>	<u>YES</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\* M-Minority(African American) W-Woman Other-H-Hispanic, AI-American Indian, AS-Asian American, Handicapped

### DECLARATION OF PERFORMANCE BY CONSULTANT/CONTRACTOR

Briefly address each of the following items:

1. A brief synopsis of the company and the products/services it provides:

*Stop Loss Insurance*

2. Describe the normal procedure used on a bid of this type, giving the flow of purchase from the company to the ultimate purchaser: *we provide insurance in return for premium.*

3. List anyone outside of your company with whom you will contract on this bid:

*N/A*

The undersigned consultant/contractor certifies that: (check appropriate box)

- a) ☒ It is the normal business practice of the consultant/contractor to perform all elements of the contract with its own workforce without the use of subcontractors/vendors; and
- b) ☒ That the above documentation demonstrates this firm's capabilities to perform all elements of the contract with its own work force or without the use of subcontractors/vendors.
- c) ☐ The vendor/contractor will use a subconsultant(s) in the fulfillment of this scope of work.

*04-10-2013*

Date

*[Signature]*  
Authorized Signature

**PARTICIPATION DOCUMENTATION  
(TO BE COMPLETED BY PRIME CONSULTANT/CONTRACTOR ONLY)**

**Names of all firms  
Project (including  
prime and  
subconsultants/sub-  
contractors)**

**Location**

**SDBE  
Firm  
Yes/No**

**Nature  
of  
Participation**

**% of Project  
Work**


**TOTAL** \_\_\_\_\_

\_\_\_\_\_  
**Name - Authorized Officer of Prime Consultant/Contractor Firm (Print/Type)**

*M / #*

\_\_\_\_\_  
**Signature - Authorized Officer of Prime Consultant/Contractor Firm**

\_\_\_\_\_  
**Date**

Reliance Standard strongly believes in the principles of Equal Employment Opportunity ("EEO") not only because we are legally required to do so, but also because it is our firm belief that it is the only acceptable way of doing business. It has been and continues to be our policy to provide equal employment opportunity to all employees and to all applicants for employment regardless of their race, color, religion, age, national origin, ancestry, pregnancy, gender, sexual orientation, marital status, familial status, disability, citizenship, veteran's status, genetic information, or any other characteristic protected by law. In all instances, we will continue to comply fully with all federal and state regulations governing employment practices.

We have a continuing commitment to hire, train, and develop the very best people we can find, basing our judgment on bona fide job-related qualifications. Our commitment to equal employment opportunity applies to all of RSL's activities including, but not limited to, recruitment, hiring, compensation, benefits, transfers, termination, assignment, training and promotion.

CO# EC34076  
u# EC34076

EQUAL EMPLOYMENT OPPORTUNITY  
2012 EMPLOYER INFORMATION REPORT  
CONSOLIDATED REPORT - TYPE 2

SECTION B - COMPANY IDENTIFICATION

1. DELPHI FINANCIAL GROUP INC  
1105 NORTH MARKET STREET  
SUITE 1230  
WILMINGTON, DE 19899

2. DELPHI FINANCIAL GROUP INC  
1105 NORTH MARKET STREET  
SUITE 1230  
WILMINGTON, DE 19899

SECTION C - TEST FOR FILING REQUIREMENT

1-Y 2-Y 3-N DUNS NO.:

Y

SECTION E - ESTABLISHMENT INFORMATION

NAICS:

SECTION D - EMPLOYMENT DATA

JOB CATEGORIES	HISPANIC OR LATINO		NOT-HISPANIC OR LATINO												OVERALL TOTALS
	MALE	FEMALE	***** MALE *****						***** FEMALE *****						
			WHITE	BLACK OR AFRICAN AMERICAN	NATIVE HAWAIIAN OR PACIFIC ISLANDER	ASIAN	AMERICAN INDIAN OR ALASKAN NATIVE	TWO OR MORE RACES	WHITE	BLACK OR AFRICAN AMERICAN	NATIVE HAWAIIAN OR PACIFIC ISLANDER	ASIAN	AMERICAN INDIAN OR ALASKAN NATIVE	TWO OR MORE RACES	
EXECUTIVE/SR OFFICIALS * MGRS	0	0	25	0	0	2	0	0	8	0	0	0	0	0	35
FIRST/MID OFFICIALS * MGRS	1	7	136	6	0	5	1	0	129	21	0	4	0	2	312
PROFESSIONALS	10	16	198	10	0	15	1	0	316	65	0	12	1	1	643
TECH WICANS	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
SALES WORKERS	2	4	102	0	0	1	0	0	27	1	0	0	0	0	137
ADMINISTRATIVE SUPPORT	23	92	80	19	0	7	0	2	373	108	2	11	3	14	734
CRAFT WORKERS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OPERATIVES	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
LABORERS & HELPERS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SERVICE WORKERS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	36	119	539	35	0	30	2	2	854	195	2	27	4	17	1862
PREVIOUS REPORT TOTAL	33	143	519	38	0	23	1	1	861	191	3	30	4	16	1863

SECTION F - REMARKS

DATES OF PAYROLL PERIOD: 08/20/2012 THRU 08/31/2012  
SECTION G - CERTIFICATION

CERTIFYING OFFICIAL:  
EEO-1 REPORT CONTACT PERSON:  
EMAIL: HELEN.DUBIL@FSL.COM

HELEN DUBIL  
HELEN DUBIL

TITLE: MANAGER, HRIS & HR ADMIN  
TITLE: MANAGER, HRIS & HR ADMIN  
TELEPHONE NO: 267.256.3778

CERTIFIED DATE/EST: 09/25/2012 02:28 PM